

**APPLICATION DATA SHEET****Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: DEVICE AND METHOD FOR STERILIZATION

Attorney Docket Number:: 027651-292

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Sweden

Status:: Full Capacity

Given Name:: Lars

Middle Name:: Ake

Family Name:: NASLUND

Name Suffix::

City of Residence:: Furulund

State or Province of Residence::

Country of Residence:: Sweden

Street of Mailing Address:: Skattevagen 12

City of Mailing Address:: Furulund

State or Province of Mailing Address::

Country of Mailing Address:: Sweden

Postal or Zip Code of Mailing Address:: S-224 65

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Sweden

Status:: Full Capacity

Given Name::	Goran
Middle Name::	
Family Name::	HERMODSSON
Name Suffix::	
City of Residence::	Staffanstorp
State or Province of Residence::	
Country of Residence::	Sweden
Street of Mailing Address::	Lenngrensvag 11
City of Mailing Address::	Staffanstorp
State or Province of Mailing Address::	
Country of Mailing Address::	Sweden
Postal or Zip Code of Mailing Address::	SE-245 32
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Sweden
Status::	Full Capacity
Given Name::	Lars
Middle Name::	
Family Name::	MARTENSSON
Name Suffix::	
City of Residence::	Veberod
State or Province of Residence::	
Country of Residence::	Sweden
Street of Mailing Address::	Vallmovagen 4

City of Mailing Address::	Veberod
State or Province of Mailing Address::	
Country of Mailing Address::	Sweden
Postal or Zip Code of Mailing Address::	SE-240 14
Applicant Authority Type::	Inventor
Primary Citizenship Country::	India
Status::	Full Capacity
Given Name::	Arun
Middle Name::	
Family Name::	DEIVASIGAMANI
Name Suffix::	
City of Residence::	Minneapolis
State or Province of Residence::	Minnesota
Country of Residence::	USA
Street of Mailing Address::	315, W. Franklin Ave, Apt #317
City of Mailing Address::	Minneapolis
State or Province of Mailing Address::	Minnesota
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	US-55404
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity

Given Name:: Paul  
Middle Name::  
Family Name:: ANDERSON  
Name Suffix::  
City of Residence:: Woodbury  
State or Province of Residence:: Minnesota  
Country of Residence:: USA  
Street of Mailing Address:: 997 Briar Glen Lane  
City of Mailing Address:: Woodbury  
State or Province of Mailing Address:: Minnesota  
Country of Mailing Address:: USA  
Postal or Zip Code of Mailing Address:: US-55129

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/SE2004/000997	06/22/04

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Sweden	0302024-5	07/08/03	Yes

## Assignee Information

Assignee Name::	Tetra Laval Holdings & Finance S.A.
Street of Mailing Address::	Av. General-Guisan 70,
City of Mailing Address::	Pully
State or Province of Mailing Address::	
Country of Mailing Address::	Switzerland
Postal or Zip Code of Mailing Address::	CH-1009